

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

FILED
OFFICE OF THE CITY CLERK
OAKLAND
2011 APR -4 PM 4:44

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
REID LARRY E.

1. Office, Agency, or Court

Agency Name

City of OAKLAND

Division, Board, Department, District, if applicable

Councilmember

Your Position

▶ If filing for multiple positions, list below or on an attachment.

Agency: Alameda County Transportation Commission Position: Boardmember

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☐ City of OAKLAND

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is / / , through December 31, 2010.

☐ Leaving Office: Date Left / / (Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date / /

☐ The period covered is / / , through the date of leaving office.

☐ Candidate: Election Year

Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

▶ Total number of pages including this cover page:

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I have used all reasonable diligence in preparing this statement. I have reviewed the herein and in any attached schedules is true and complete. I acknowledge this is a
I certify under penalty of perjury under the laws of the State of California that t

Date Signed 3/4/11
(month, day, year)

Signature

ORIGINAL

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SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Samuel E. Paul

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Alameda County Transportation Commission

ADDRESS (Business Address Acceptable)

330 Broadway Street 3rd fl.

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Countywide Transportation Agency

YOUR BUSINESS POSITION

Boardmember

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other Boardmeeting Stipend
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

TERM (Months/Years)

_____% ☐ None

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

ORIGINAL